Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
MIDDLE DISTRICT OF FLORIDA		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this a amended filin

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1: Identify Yourself	Identify Yourself					
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):				
1.	Your full name						
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Julana First name Denise Middle name Evans Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)				
2.	All other names you have used in the last 8 years Include your married or maiden names.	Julana Goar					
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-5480					

Case 6:19-bk-01459-KSJ Doc 1 Filed 03/07/19 Page 2 of 62

Debtor 1 Julana Denise Evans

Case number (if known)

4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
		I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs
5. Where you live		900 Alsace Drive	If Debtor 2 lives at a different address:
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Osceola County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
Why you are choosing this district to file for		Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Case 6:19-bk-01459-KSJ Doc 1 Filed 03/07/19 Page 3 of 62

Part				Case number (if known)					
Dart									
Iail	Tell the Court About	our Bankruptcy C	ase						
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankro (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to file under	Chapter 7							
		☐ Chapter 11							
		☐ Chapter 12							
		☐ Chapter 13							
		·							
8.	How you will pay the fee	about how y	ou may pay. Typically, if you are attorney is submitting your pay	tire fee when I file my petition. Please check with the clerk's office in your local court for more details nay pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money brney is submitting your payment on your behalf, your attorney may pay with a credit card or check with dress.					
				ne fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay					
		ŭ	ee in Installments (Official Form	,	only if you are filing for Chapter 7. By law, a judg	e mav.			
		but is not red applies to yo	luired to, waive your fee, and ma ur family size and you are unabl	ay do so only if your le to pay the fee in i	income is less than 150% of the official poverty nstallments). If you choose this option, you must I Form 103B) and file it with your petition.	line that			
9.	Have you filed for	■ No.							
	bankruptcy within the last 8 years?	☐ Yes.							
		District		When	Case number				
		District		When	Case number				
		District	-	When	Case number				
10.	Are any bankruptcy	■ No							
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.							
		Debtor			Relationship to you				
		District		When	Case number, if known				
		Debtor			Relationship to you				
		District		When	Case number, if known				
11.	Do you rent your	□ No. Go to	line 12.						
	residence?	■ Yes. Has ye	our landlord obtained an eviction	n judgment against y	ou?				
		_ 1 33 .	No. Go to line 12.						
			Yes. Fill out <i>Initial Statement A</i> bankruptcy petition.	About an Eviction Ju	dgment Against You (Form 101A) and file it with	this			

Case 6:19-bk-01459-KSJ Doc 1 Filed 03/07/19 Page 4 of 62

Debtor 1 Julana Denise Evans					Case number (if known)
Par	Report About Any Bu	ısinesses	You Ow	n as a Sole Proprie	tor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	e and location of bus	siness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any	
	If you have more than one sole proprietorship, use a		Numl	oer, Street, City, Sta	te & ZIP Code
separate sheet and attach it to this petition. Check the appropriate box to describe your business:					ox to describe your business:
					ness (as defined in 11 U.S.C. § 101(27A))
					Estate (as defined in 11 U.S.C. § 101(51B))
				-	lefined in 11 U.S.C. § 101(53A))
					er (as defined in 11 U.S.C. § 101(6))
				None of the above	
	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D).	déadline	s. If you ins, cash-f S.C. 1116 I am I am Code	ndicate that you are low statement, and to (1)(B). not filing under Chapter in the control of t	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure oter 11. 11, but I am NOT a small business debtor according to the definition in the Bankruptcy 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	/ Hazard	ous Property or An	y Property That Needs Immediate Attention
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is , why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	s the property?	
					Number, Street, City, State & Zip Code

Debtor 1 Julana Denise Evans

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 6:19-bk-01459-KSJ Doc 1 Filed 03/07/19 Page 6 of 62

Debtor 1 Julana Denise Evans				Case number (if known)		
Par	t 6: Answer These Quest	ions for R	eporting Purposes			
	What kind of debts do you have?	16a.		umer debts? Consumer debts are definal, family, or household purpose."	ned in 11 U.S.C. § 101(8) as "incurred by an	
			☐ No. Go to line 16b.			
			Yes. Go to line 17.			
		16b.		ness debts? Business debts are debts nent or through the operation of the busi		
			☐ No. Go to line 16c.	ion of imough the operation of the busi	ness of investment.	
			☐ Yes. Go to line 17.			
		16c.		that are not consumer debts or busines	s debts	
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7.	Go to line 18.		
	Do you estimate that after any exempt property is excluded and	■ Yes.		you estimate that after any exempt propuble to distribute to unsecured creditors?	erty is excluded and administrative expenses	
	administrative expenses		■ No			
	are paid that funds will be available for		□Yes			
	distribution to unsecured creditors?					
18.	How many Creditors do	■ 1-49		☐ 1,000-5,000	□ 25,001-50,000	
	you estimate that you owe?	■ 1-49 ■ 50-99		☐ 5001-10,000	☐ 50,001-100,000	
	owe?	□ 100-1		□ 10,001-25,000	☐ More than100,000	
		□ 200-9	99			
19.	How much do you	\$0 - \$	50,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion	
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion	
			001 - \$500,000 001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion	
20.	How much do you estimate your liabilities	□ \$0 - \$	50,000 001 - \$100,000	☐ \$1,000,001 - \$10 million ☐ \$10,000,001 - \$50 million	\$500,000,001 - \$1 billion	
	to be?		001 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion	
			001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion	
Par	t 7: Sign Below					
	you	I have ex	amined this petition, and I declare	e under penalty of periury that the inform	nation provided is true and correct	
	,	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11,				
				f available under each chapter, and I ch		
		If no atto documer	rney represents me and I did not it, I have obtained and read the n	pay or agree to pay someone who is no otice required by 11 U.S.C. § 342(b).	t an attorney to help me fill out this	
		I request	relief in accordance with the chap	oter of title 11, United States Code, spec	cified in this petition.	
			cy case can result in fines up to \$	ncealing property, or obtaining money o 250,000, or imprisonment for up to 20 y	r property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519,	
		Julana	na Denise Evans Denise Evans e of Debtor 1	Signature of Debtor	72	
		Executed	on March 4, 2019	Executed on		
		_,,500,00	MM / DD / YYYY		/ DD / YYYY	

•	Case 6:19-0K-01459-KSJ Doc	T Filed 03/07/19	Page 7 01 62	
Debtor 1 Julana Denise Ev	vans	Case number (if known)		
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, Unite	d States Code, and have e	informed the debtor(s) about eligibility to proceed xplained the relief available under each chapter lebtor(s) the notice required by 11 U.S.C. § 342(b)	
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) applies, schedules filed with the petition is incorrect.	certify that I have no know	ledge after an inquiry that the information in the	
	/s/ Randy Hillman	Date	March 4, 2019	
	Signature of Attorney for Debtor		MM / DD / YYYY	
	Randy Hillman 273627			
	Printed name			
	Randy Hillman, P.A.			
	Firm name			
	1073 Willa Springs Drive #2029			
	Winter Springs, FL 32708			
	Number, Street, City, State & ZIP Code			
	Contact phone 407 695-0874	Email address	HillmanLaw@outlook.com	

273627 FL Bar number & State

Case 6:19-bk-01459-KSJ Doc 1 Filed 03/07/19 Page 8 of 62

F:U :	in Alain info					
		rmation to identify your				
Deb	tor 1	Julana Denise Ev	Yans Middle Name	Last Name		
Deb	tor 2					
(Spot	ise if, filing)	First Name	Middle Name	Last Name		
Unit	ed States E	Sankruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA		
Cas (if kno	e number _{own)}				_	eck if this is an ended filing
Sul Be as	nmary s complete mation. Fil	and accurate as possible and accurate as possible and all of your schedule.	ole. If two married people es first; then complete the	nd Certain Statistical Information are filing together, both are equally responsible information on this form. If you are filing amend the box at the top of this page.	e for suppl	
Part	1: Sum	marize Your Assets				
						r assets e of what you own
1.	Schedule 1a. Copy I	A/B: Property (Official Fo	orm 106A/B) rom Schedule A/B		\$_	0.00
	1b. Copy I	ine 62, Total personal pro	perty, from Schedule A/B		\$_	3,970.00
	1c. Copy I	ine 63, Total of all propert	y on Schedule A/B		\$_	3,970.00
Part	2: Sum	marize Your Liabilities				
					You	r liabilities
					Amo	ount you owe
2.			laims Secured by Property mn A, Amount of claim, at	/ (Official Form 106D) the bottom of the last page of Part 1 of Schedule D	o \$ _	0.00
3.			Unsecured Claims (Official (priority unsecured claim)	al Form 106E/F) ns) from line 6e of <i>Schedule E/F</i>	\$_	0.00
	3b. Сору	the total claims from Part	2 (nonpriority unsecured o	claims) from line 6j of Schedule E/F	\$_	131,541.95
				Your total liabilit	ies \$	131,541.95
Part	3: Sum	marize Your Income and	Expenses			
4.		I: Your Income (Official For combined monthly incom		ə I	\$_	3,440.00
5.		J: Your Expenses (Official monthly expenses from li			\$_	3,635.00
Part	4: Ansv	ver These Questions for	Administrative and Stat	istical Records		
6.	-	• • •	er Chapters 7, 11, or 13? on this part of the form. C	check this box and submit this form to the court with	your other	schedules.
7.	■ Yes	d of debt do you have?				
				debts are those "incurred by an individual primarily of for statistical purposes. 28 U.S.C. § 159.	for a persor	nal, family, or
		debts are not primarily ourt with your other sched		ve nothing to report on this part of the form. Check	this box and	d submit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

Case 6:19-bk-01459-KSJ Doc 1 Filed 03/07/19 Page 9 of 62

Debtor 1 Julana Denise Evans Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ 2,786.83

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total cla	im
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Case 6:19-bk-01459-KSJ Doc 1 Filed 03/07/19 Page 10 of 62

	Case 0.13-bk-0	1439-133 DOC 1 Thea 03/07/19	rage 10 01 02	-
Fill in this inform	mation to identify your case a	nd this filing:		
Debtor 1	Julana Denise Evans			
	First Name	Middle Name Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name Last Name		
United States Ba	ankruptcy Court for the: MIDD	LE DISTRICT OF FLORIDA		
				_
Case number _				☐ Check if this is an amended filing
				Jan 19 19 19 19 19 19 19 19 19 19 19 19 19
Official Fo	orm 106A/B			
	e A/B: Property			40/45
		List an asset only once. If an asset fits in more than on	a category list the asset in	12/15
think it fits best. B	Be as complete and accurate as po re space is needed, attach a separ	ossible. If two married people are filing together, both are rate sheet to this form. On the top of any additional page	e equally responsible for s	upplying correct
Part 1: Describe	Each Residence, Building, Land,	or Other Real Estate You Own or Have an Interest In		
Do you own or I	have any legal or equitable interes	st in any residence, building, land, or similar property?		
■ No. Go to Par	+ O			
Yes. Where i				
Part 2: Describe	Your Vehicles			
□ No ■ Yes	ucks, tractors, sport utility ve	hicles, motorcycles		
=	Hyundai	Who has an interest in the property? Check one	the amount of any secur	claims or exemptions. Put red claims on <i>Schedule D</i> :
	Tucson 2005	■ Debtor 1 only □ Debtor 2 only		nims Secured by Property.
Approximat		Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
Other infor	mation:	☐ At least one of the debtors and another		
4 door Vin No:	KM8JN12D25U223440	Check if this is community property (see instructions)	\$1,750.00	\$1,750.00
Examples: Boa No Yes Add the dolla pages you ha	ats, trailers, motors, personal was ar value of the portion you ow ave attached for Part 2. Write	of other recreational vehicles, other vehicles, and itercraft, fishing vessels, snowmobiles, motorcycle action for all of your entries from Part 2, including any that number here	entries for	\$1,750.00 Current value of the portion you own? Do not deduct secured
6. Household ad	oods and furnishings			claims or exemptions.

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Official Form 106A/B Schedule A/B: Property

Debtor 1	Julana Denise Evans Case number (if	known)
■ Yes.	Describe	
	Household Goods and Furnishings. Living Room: Couch, 2 lamps, 2 tables, 1 television. Bedrooms: 3 beds, 3 night tables, 3 dressers, 4 lamps, 1 television. Dining Room: Table and 4 chairs. Kitchen: 2 chairs.	\$820.00
□ No	nics les: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; including cell phones, cameras, media players, games Describe	music collections; electronic devices
	Laptop computer, printer, cell phone	\$250.00
Examp ■ No	 ibles of value iles: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stam other collections, memorabilia, collectibles Describe 	p, coin, or baseball card collections;
Examp No	nent for sports and hobbies les: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; c musical instruments Describe	anoes and kayaks; carpentry tools;
□ No	ms ples: Pistols, rifles, shotguns, ammunition, and related equipment Describe	
	38 Revolver	\$200.00
□ No	es ples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Describe	
	Clothing	\$100.00
□ No	ry ples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, of the control of the	gems, gold, silver
	Jewellry	\$100.00
Exam ■ No □ Yes.	arm animals pples: Dogs, cats, birds, horses Describe ther personal and household items you did not already list, including any health aids you did not	t list
■ Yes.	Give specific information	
	Lawnmower	\$50.00

Official Form 106A/B

Case 6:19-bk-01459-KSJ Doc 1 Filed 03/07/19 Page 12 of 62

Debto	or 1	Julana Denise Evans	Case number (if k	known)
		he dollar value of all of your entries from art 3. Write that number here	Part 3, including any entries for pages you have attach	ed \$1,520.00
Part 4	: Des	scribe Your Financial Assets		
Do yo	ou ow	n or have any legal or equitable interest	in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	E <i>xamp</i> No	oles: Money you have in your wallet, in your	home, in a safe deposit box, and on hand when you file you	r petition
_	103		Cash	\$5.00
			Cash Capit One	al \$140.00
	Examp No	ts of money les: Checking, savings, or other financial acides institutions. If you have multiple account	counts; certificates of deposit; shares in credit unions, brokents with the same institution, list each. Institution name:	erage houses, and other similar
		17.1.	Bank of America Checking and Savings	\$555.00
E	Ехатр	mutual funds, or publicly traded stocks bles: Bond funds, investment accounts with l	prokerage firms, money market accounts	
	No Yes	Institution or issue	er name:	
jc	oint v	iblicly traded stock and interests in incol enture	porated and unincorporated businesses, including an i	nterest in an LLC, partnership, and
_	No Yes.	Give specific information about them Name of entity:		:
	Vegotia Von-ne	able instruments include personal checks, c	gotiable and non-negotiable instruments ashiers' checks, promissory notes, and money orders. transfer to someone by signing or delivering them.	
	No Yes.	Give specific information about them Issuer name:		
_E		nent or pension accounts oles: Interests in IRA, ERISA, Keogh, 401(k)	, 403(b), thrift savings accounts, or other pension or profit-sl	haring plans
	Yes. I	List each account separately. Type of account:	Institution name:	
Y E	our sl		so that you may continue service or use from a company t, public utilities (electric, gas, water), telecommunications c	companies, or others
			Institution name or individual:	
	nnuiti No	es (A contract for a periodic payment of mo	ney to you, either for life or for a number of years)	

Official Form 106A/B Schedule A/B: Property page 3

Case 6:19-bk-01459-KSJ Doc 1 Filed 03/07/19 Page 13 of 62

De	btor 1	Julana De	enise Evans	Case numbe	r (if known)
	☐ Yes		Issuer name and description.		
24.			ation IRA, in an account in a 1), 529A(b), and 529(b)(1).	qualified ABLE program, or under a qualified state	tuition program.
	☐ Yes		Institution name and descripti	on. Separately file the records of any interests.11 U.S.C). § 521(c):
	■ No	•	r future interests in property	other than anything listed in line 1), and rights or p	owers exercisable for your benefit
26.				and other intellectual property eds from royalties and licensing agreements	
		Give specific	information about them		
	Examp ■ No	oles: Building	es, and other general intangik permits, exclusive licenses, con c information about them	oles operative association holdings, liquor licenses, professi	onal licenses
	00.	Civo opocino	internation about therm		
M	oney or p	property owe	ed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	■ No	funds owed to		ng whether you already filed the returns and the tax ye	ars
29.		support bles: Past due	e or lump sum alimony, spousal	support, child support, maintenance, divorce settlemer	nt, property settlement
	☐ Yes.	Give specific	information		
30.	Examp _	oles: Unpaid w	neone owes you vages, disability insurance payr ; unpaid loans you made to son	nents, disability benefits, sick pay, vacation pay, workeneone else	ers' compensation, Social Security
	■ No □ Yes.	Give specific	information		
31.		ts in insuran oles: Health, d		rh savings account (HSA); credit, homeowner's, or rente	er's insurance
	☐ Yes.	Name the ins	urance company of each policy Company name:	and list its value. Beneficiary:	Surrender or refund value:
32.	If you a		perty that is due you from soliciary of a living trust, expect pr	neone who has died occeds from a life insurance policy, or are currently ent	itled to receive property because
	■ No □ Yes.	Give specific	: information		
33.			d parties, whether or not you s, employment disputes, insura	have filed a lawsuit or made a demand for payment nce claims, or rights to sue	t
	■ No				
	☐ Yes.	Describe eac	ch claim		
34.	Other o	contingent ar	nd unliquidated claims of eve	ry nature, including counterclaims of the debtor an	d rights to set off claims
		Describe eac	ch claim		

Official Form 106A/B Schedule A/B: Property page 4

Case 6:19-bk-01459-KSJ Doc 1 Filed 03/07/19 Page 14 of 62

Debtor '	Julana Denise Evans		Case number (if known)	
_	financial assets you did not already list			
■ No				
□Y€	s. Give specific information			
	d the dollar value of all of your entries from Part 4, includi Part 4. Write that number here			\$700.00
Part 5:	Describe Any Business-Related Property You Own or Have an Inte	rest In. List any real esta	ate in Part 1.	
37. Do yo	ou own or have any legal or equitable interest in any business-rela	ted property?		
■ No.	Go to Part 6.			
☐ Yes	. Go to line 38.			
	Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	u Own or Have an Interes	st In.	
46. Do y	ou own or have any legal or equitable interest in any farm	- or commercial fishin	g-related property?	
I	lo. Go to Part 7.			
	es. Go to line 47.			
	_			
Part 7:	Describe All Property You Own or Have an Interest in That Yo	u Did Not List Above		
	ou have other property of any kind you did not already list	1?		
_	mples: Season tickets, country club membership			
■ No				
⊔ Y€	s. Give specific information			
54. Ad	d the dollar value of all of your entries from Part 7. Write th	nat number here		\$0.00
	·			·
Part 8:	List the Totals of Each Part of this Form			
55. Pa	rt 1: Total real estate, line 2			\$0.00
56. Pa	rt 2: Total vehicles, line 5	\$1,750.00		<u> </u>
57. Pa	rt 3: Total personal and household items, line 15	\$1,520.00		
58. Pa	rt 4: Total financial assets, line 36	\$700.00		
59. Pa	rt 5: Total business-related property, line 45	\$0.00		
60. Pa	rt 6: Total farm- and fishing-related property, line 52	\$0.00		
61. Pa	rt 7: Total other property not listed, line 54	\$0.00		
62. To	tal personal property. Add lines 56 through 61	\$3,970.00	Copy personal property total	\$3,970.00
63. To	tal of all property on Schedule A/B. Add line 55 + line 62			\$3,970.00

Official Form 106A/B Schedule A/B: Property page 5

Fil	II in this inform	ation to identify your case:					
	ebtor 1	Julana Denise Evans					
	50101 1	First Name	Middle Name	L	ast Name		
	ebtor 2 couse if, filing)	First Name	Middle Name		.ast Name		
Ur	nited States Ban	kruptcy Court for the: MID	DLE DISTRICT OF FLO	KIDA			
	ase number						Check if this is an
							amended filing
O	fficial For	m 106C					
S	chedule	C: The Prope	erty You Cla	im	as Exempt		4/16
For special sp	property you liseded, fill out and se number (if known reach item of pecific dollar amy applicable stands—may be unemption to a pathe applicable stands—the applicable stands—th	ted on Schedule A/B: Propert attach to this page as many own). property you claim as exempount as exempt. Alternative attactory limit. Some exemption and the statutory amount. He recommend the property You Claim as exemptions are you claiming state and federal nonbasiming federal exemptions.	ty (Official Form 106A/B) copies of Part 2: Addition of the property, you must specify the ly, you may claim the fors—such as those for owever, if you claim and the value of the property of	e amo full fa r heali n exen n if you	fill in the information below.	One way of bing exempte benefits, and the under a latt, your exempter to the control of the cont	empt. If more space is ages, write your name and doing so is to state a ed up to the amount of I tax-exempt retirement we that limits the
			Copy the value from Schedule A/B	Copy the value from Check only one box for each exemption. Schedule A/B			
	2005 Hyund 4 door	ai Tucson 150,000 miles	\$1,750.00		\$1,000.00	Fla. Stat.	Ann. § 222.25(1)
		8JN12D25U223440 edule A/B: 3.1			100% of fair market value, up to any applicable statutory limit		
	2005 Hyund	ai Tucson 150,000 miles	\$1,750.00		\$750.00	Fla. Stat.	Ann. § 222.25(4)
	Vin No: KM	8JN12D25U223440			100% of fair market value, up to		
	Line from Sche	edule A/B: 3.1			any applicable statutory limit		
		Goods and Furnishings. n: Couch, 2 lamps, 2	\$820.00		\$820.00	Fla. Cons	st. art. X, § 4(a)(2)
	tables, 1 tele beds, 3 nigh lamps, 1 tel	evision. Bedrooms: 3 at tables, 3 dressers, 4 evision. Dining Room: chairs. Kitchen: 2			100% of fair market value, up to any applicable statutory limit		
	Laptop com	puter, printer, cell phone	\$250.00		\$250.00	Fla. Stat.	Ann. § 222.25(4)
	Line from Scho	edule A/B: 7.1	· · · · · · · · · · · · · · · · · · ·		100% of fair market value, up to any applicable statutory limit		

Official Form 106C

Case 6:19-bk-01459-KSJ Doc 1 Filed 03/07/19 Page 16 of 62

otor 1 Julana Denise Evans			Case number (if known)	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
38 Revolver	\$200.00		\$200.00	Fla. Stat. Ann. § 222.25(4)
Line from Schedule A/B: 10.1			100% of fair market value, up to any applicable statutory limit	
Clothing Line from Schedule A/B: 11.1	\$100.00		\$100.00	Fla. Stat. Ann. § 222.25(4)
Line nom <i>Schedule AVD</i> . 11.1			100% of fair market value, up to any applicable statutory limit	
Jewellry Line from Schedule A/B: 12.1	\$100.00		\$100.00	Fla. Stat. Ann. § 222.25(4)
LINE HOLL SCHEDULE PAB. 12.1			100% of fair market value, up to any applicable statutory limit	
Lawnmower Line from Schedule A/B: 14.1	\$50.00		\$50.00	Fla. Stat. Ann. § 222.25(4)
Line IIOIII <i>Schedule AVD</i> . 14.1			100% of fair market value, up to any applicable statutory limit	
Cash Line from Schedule A/B: 16.1	\$5.00		\$5.00	Fla. Stat. Ann. § 222.25(4)
Line IIOIII <i>Schedule AVD</i> . 10.1			100% of fair market value, up to any applicable statutory limit	
Cash Capital One Line from Schedule A/B: 16.2	\$140.00		\$140.00	Fla. Stat. Ann. § 222.25(4)
Ellie IIolii ochedale Add. 10.2			100% of fair market value, up to any applicable statutory limit	
Bank of America Checking and Savings	\$555.00		\$555.00	Fla. Stat. Ann. § 222.25(4)
Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every			led on or after the date of adjustmer	nt.)
Yes. Did you acquire the property cove	ered by the exemption w	ithin 1	,215 days before you filed this case	?
□ No □ Yes				
_ 103				

Case 6:19-bk-01459-KSJ Doc 1 Filed 03/07/19 Page 17 of 62

Fill in this information to identify your case:						
Debtor 1	Julana Denise Ev	ans				
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA			
Case number _					☐ Check if this is an amended filing	

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

Case 6:19-bk-01459-KSJ Doc 1 Filed 03/07/19 Page 18 of 62

	Case 0.19-b	k-01439-133 DOC1 Tiled 03/07/19 Page 10 01	JZ
Fill in t	this information to identify your ca	se:	
Debtor	1 Julana Denise Evar	ns.	
	First Name	Middle Name Last Name	
Debtor (Spouse i		Middle Name Last Name	
United	States Bankruptcy Court for the:	MIDDLE DISTRICT OF FLORIDA	
Case n			Check if this is an amended filing
Offici	al Form 106E/F		
Sche	dule E/F: Creditors Wh	o Have Unsecured Claims	12/15
Schedul Schedul left. Atta	e G: Executory Contracts and Unexpire e D: Creditors Who Have Claims Secur ich the Continuation Page to this page. Id case number (if known).	at could result in a claim. Also list executory contracts on Schedule A/B: Property (d Leases (Official Form 106G). Do not include any creditors with partially secured cl ed by Property. If more space is needed, copy the Part you need, fill it out, number th If you have no information to report in a Part, do not file that Part. On the top of any	aims that are listed in he entries in the boxes on the
	any creditors have priority unsecured of		
_	No. Go to Part 2.	nams against you.	
_			
Part 2:	Yes. List All of Your NONPRIORITY	Unaccured Claims	
	any creditors have nonpriority unsecue No. You have nothing to report in this part Yes.	ed claims against you? Submit this form to the court with your other schedules.	
uns	ecured claim, list the creditor separately for one creditor holds a particular claim, list	ns in the alphabetical order of the creditor who holds each claim. If a creditor has more ach claim. For each claim listed, identify what type of claim it is. Do not list claims alread the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out	dy included in Part 1. If more
			Total claim
4.1	Acceptance Now	Last 4 digits of account number 0898	\$2,342.39
	Nonpriority Creditor's Name Rooms to Go 5501 Headquarters Drive Plano, TX 75024	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and anoth	er Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a commu	nity Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did report as priority claims	not
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Furniture	

Case 6:19-bk-01459-KSJ Doc 1 Filed 03/07/19 Page 19 of 62

Debtor	1 Julana Denise Evans	Case number (if known)	
4.2	Advance America	Last 4 digits of account number 6797	\$1,263.67
	Nonpriority Creditor's Name First Financial Assets Mge 876 S. US 17-192	When was the debt incurred?	
	Longwood, FL 32750 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	• • • • • • • • • • • • • • • • • • • •	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.3	Ashton Way Apartment Nonpriority Creditor's Name	Last 4 digits of account number	Unknown
	2613 N. Midland Drive Midland, TX 79707	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Rent Apartment	
4.4	Auto Advantage Finance	Last 4 digits of account number XXXX	\$4,635.00
	Nonpriority Creditor's Name 4810 NW 39	When was the debt incurred?	
	Oklahoma City, OK 73122 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	

Case 6:19-bk-01459-KSJ Doc 1 Filed 03/07/19 Page 20 of 62

Debtor	1 Julana Denise Evans	Case number (if known)	
4.5	Brighton Court Apartments	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name 3221 Neely Avenue Midland, TX 79707	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Rent Apartment	
4.6	Capio Partners	Last 4 digits of account number 0996	\$1,505.00
	Nonpriority Creditor's Name 2222Texoma PY 150 Sherman, TX 75091	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.7	Capio Partners	Last 4 digits of account number	\$2,239.00
	Nonpriority Creditor's Name 2222 Texoma PY 150	When was the debt incurred?	
	Sherman, TX 75091 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	

Case 6:19-bk-01459-KSJ Doc 1 Filed 03/07/19 Page 21 of 62

Debto	Julana Denise Evans	Case number (if known)	
4.8	Capital One	Last 4 digits of account number 0756	\$0.00
	Nonpriority Creditor's Name P.O. Box 60599	When was the debt incurred?	
	City of Industry, CA 91716 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	\$135.00
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify Secured Card \$200 limit Debt of \$61.44	
4.9	Capital One Bank	Last 4 digits of account number	\$135.00
	Nonpriority Creditor's Name P.O. Box 30281	When was the debt incurred?	
	Salt Lake City, UT 84130 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.1	Conn Appliances, Inc.	Last 4 digits of account number	\$561.00
	Nonpriority Creditor's Name P.O. Box 2358	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Пол	
		☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	□ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	

Case 6:19-bk-01459-KSJ Doc 1 Filed 03/07/19 Page 22 of 62

Debto	Julana Denise Evans	Case number (if known)	
4.1		4499	4=====
1	Courtesy Loans	Last 4 digits of account number 41XX	\$508.00
	Nonpriority Creditor's Name 1600 E. Main Street Cushing, OK 74023	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	\square Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.1	Credit Collection Services	Last 4 digits of account number 5256	\$152.00
2	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ102.00
	725 Canton Street	When was the debt incurred?	
	Norwood, MA 02062		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_		
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
	163	Other: Specify	
4.1	Credit Collections, Inc.	Last 4 digits of account number XXXX	\$246.00
3	Nonpriority Creditor's Name		·
	P.O. Box 60607	When was the debt incurred?	
	Oklahoma City, OK 73146	As of the data you file the plain in O	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Пол	
		Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	<u> </u>	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical Henry Glen MD	
	_ · - •	— Oner. Specify	

Case 6:19-bk-01459-KSJ Doc 1 Filed 03/07/19 Page 23 of 62

Debto	or 1 Julana Denise Evans	Case number (if known)	
4.1	Direct TV	Last 4 digits of account number XXXX	\$706.00
4	Nonpriority Creditor's Name c/o Recievables Performance 20816 44th Avenue W.	When was the debt incurred?	Ψ700.00
	Lynnwood, WA 98036 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.1 5	Eagle Peak Emerg Phys, LLC Nonpriority Creditor's Name	Last 4 digits of account number 6902	\$1,989.00
	P.O. Box 80150 Philadelphia, PA 19101-1150	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.1 6	Eagle Peak Emergency Phy LLC	Last 4 digits of account number 2072	\$1,296.00
	Nonpriority Creditor's Name P.O. Box 80150 Philadelphia, PA 19101-1150	When was the debt incurred? Januay 2019	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	\square Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Services	

Case 6:19-bk-01459-KSJ Doc 1 Filed 03/07/19 Page 24 of 62

Debto	r 1 Julana Denise Evans	Case number (if known)	
4.1			
4.1 7	Enhanced Recovery Company	Last 4 digits of account number	\$429.00
	Nonpriority Creditor's Name P.O. Box 57547	When was the debt incurred?	
	Jacksonville, FL 32241	When was the dept incurred:	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	\square Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.1	Exeter Finance LLC		\$29,999.00
8	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ29,999.00
	P.O. Box 166097	When was the debt incurred?	
	Irving, TX 75016		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	_		
	☐ Yes	Other. Specify	
4.1 9	Express Credit Auto	Last 4 digits of account number	\$4,698.00
<u> </u>	Nonpriority Creditor's Name		
	4810 NW 39th Street	When was the debt incurred?	
	Oklahoma City, OK 73122 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the dam is. Oneok an that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	·	
	At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
	_	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Auto Ioan - Escape	
		op oon,	

Case 6:19-bk-01459-KSJ Doc 1 Filed 03/07/19 Page 25 of 62

Debto	Julana Denise Evans	Case number (if known)	
4.2			
0	First Premier Bank	Last 4 digits of account number	\$697.00
	Nonpriority Creditor's Name 3820 N. Louise Avenue Sioux Falls, SD 57107	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.2	Hunter Warfield Inc.	Last 4 digits of account number	\$1,641.00
<u>'</u>	Nonpriority Creditor's Name		
	4620 Woodland Corporate Bv Tampa, FL 33614	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify	
4.2	Imagine	Last 4 digits of account number XXXX	\$976.00
	Nonpriority Creditor's Name		
	P.O. Box 105555	When was the debt incurred?	
	Atlanta, GA 30348 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	

Case 6:19-bk-01459-KSJ Doc 1 Filed 03/07/19 Page 26 of 62

Debto	ebtor 1 Julana Denise Evans Case number (if known)		
4.2	Jefferson Capital System	Last 4 digits of account number XXXX	\$789.00
3	Nonpriority Creditor's Name 16 McLeland Road Saint Cloud, MN 56303	When was the debt incurred?	<u> </u>
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify	
4.2 4	Jefferson Capital System	Last 4 digits of account number	\$532.00
	Nonpriority Creditor's Name 16 McLeland Road Saint Cloud, MN 56303	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.2			
5	Jefferson Capital System	Last 4 digits of account number	\$12,707.00
	Nonpriority Creditor's Name 16 McLeland Road Saint Cloud, MN 56303	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ _{No}	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	

Case 6:19-bk-01459-KSJ Doc 1 Filed 03/07/19 Page 27 of 62

Debto	Julana Denise Evans	Case number (if known)	
4.2			
6	Lake Jackson Modern Dentistr	Last 4 digits of account number 1282	\$430.00
	Nonpriority Creditor's Name 90 Oak Drive Suite C	When was the debt incurred?	
	Lake Jackson, TX 77566		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify Patient Haley Goar	
4.2 7	Mattress Firm	Last 4 digits of account number 0286	\$1,178.00
	Nonpriority Creditor's Name 4650 Pleasant Hill Road Kissimmee, FL 34758	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.2	Meridian Technology	Last 4 digits of account number XXXX	\$921.00
	Nonpriority Creditor's Name 1312 South Sangre Road Stillwater, OK 74074	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	

Case 6:19-bk-01459-KSJ Doc 1 Filed 03/07/19 Page 28 of 62

Julana Denise Evans	Case number (if known)	
		^- 444
Midland Emergency Management	Last 4 digits of account number	\$544.0
Nonpriority Creditor's Name 2435 Hwy 80 Midland, TX 79706	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Neighborhood Credit Union	Last 4 digits of account number	\$201.
Nonpriority Creditor's Name 13651 Montfort Drive	When was the debt incurred?	
Dallas, TX 75240 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	To or the date you me, the dam to. Orest an that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Oklahoma Natural Gas	Last 4 digits of account number XXXX	\$114.
Nonpriority Creditor's Name		
P.O. Box 219296 Kansas City, MO 64121	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	

Case 6:19-bk-01459-KSJ Doc 1 Filed 03/07/19 Page 29 of 62

Julana Denise Evans	Case number (if known)	
Poinciana Medical Center	Last 4 digits of account number 5690	\$24,811.0
Nonpriority Creditor's Name P.O. Box 406687	When was the debt incurred?	
Atlanta, GA 30384 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\Box Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify	
Poinciana Medical Center	Last 4 digits of account number 3136	\$1,505.8
Nonpriority Creditor's Name		
P.O. Box 740771	When was the debt incurred? January 24,	
Cincinnati, OH 45274-0771 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	\square Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical Services	
Poinciana Medical Center	Last 4 digits of account number 0536	\$2,239.5
Nonpriority Creditor's Name P.O. Box 740771 Cincinnati, OH 45274-0771	When was the debt incurred? September 7, 2017	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Medical Services	

Case 6:19-bk-01459-KSJ Doc 1 Filed 03/07/19 Page 30 of 62

Julana Denise Evans	Case number (if known)	
Poinciana Medical Center	Last 4 digits of account number 8207	\$2,338.5
Nonpriority Creditor's Name P.O. Box 740771	Last 4 digits of account number When was the debt incurred? January 14, 2019	Ψ2,330.3
Cincinnati, OH 45274-0771		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify	
Rooms To Go	Last 4 digits of account number	\$3,000.0
Nonpriority Creditor's Name		. ,
	When was the debt incurred?	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Furniture	
Santa Fe Apartments	Last 4 digits of account number	\$2,500.0
Nonpriority Creditor's Name		
5010 Loop 250 Frontage Road	When was the debt incurred?	
Midland, TX 79707		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other, Specify apartment rent	

Case 6:19-bk-01459-KSJ Doc 1 Filed 03/07/19 Page 31 of 62

Debtor 1 Julana Den	ise Evans	Case number (if known)	
4.3 Santandor Co	onsumer USA	Last 4 digits of account number XXXX	\$15,214.00
Nonpriority Creditor P.O. Box 660	or's Name	Last 4 digits of account number	\$13,214.00
Dallas, TX 75 Number Street Cit		As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	e debt? Check one.	☐ Contingent	
Debtor 2 only		☐ Unliquidated	
Debtor 1 and [Debtor 2 only	Disputed	
	the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this	claim is for a community	☐ Student loans	
debt Is the claim subj	ect to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No		☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes		■ Other. Specify chevy truck	
4.3 Security Fina	ince COrp	Last 4 digits of account number XXXX	\$968.00
Nonpriority Credito P.O. Box 314	6	When was the debt incurred?	
Spartanburg, Number Street Cit		As of the date you file, the claim is: Check all that apply	
	e debt? Check one.	As of the date you file, the claim is. Check all that apply	
■ Debtor 1 only	Cacal Cincon Cinc	☐ Contingent	
Debtor 2 only		☐ Unliquidated	
Debtor 1 and [Dahtar O anlı	☐ Disputed	
_	the debtors and another	Type of NONPRIORITY unsecured claim:	
_		□ Student loans	
debt	claim is for a community	Dobligations arising out of a separation agreement or divorce that you did not	
Is the claim subj	ect to offset?	report as priority claims	
■ No		lacksquare Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes		Other. Specify	
4.4 Security Fina	nce COrp	Last 4 digits of account number XXXX	\$968.00
Nonpriority Credite	or's Name		,
P.O. Box 314		When was the debt incurred?	
Spartanburg, Number Street Cit		As of the date you file, the claim is: Check all that apply	
	e debt? Check one.	The of the state year me, the statement of the state apply	
Debtor 1 only		☐ Contingent	
Debtor 2 only		□ Unliquidated	
Debtor 1 and [Debtor 2 only	Disputed	
	the debtors and another	Type of NONPRIORITY unsecured claim:	
	claim is for a community	☐ Student loans	
debt Is the claim subj	·	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No		☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes		■ Other. Specify	

Case 6:19-bk-01459-KSJ Doc 1 Filed 03/07/19 Page 32 of 62

Julana Denise Evans	Case number (if known)	
Sheridan Radiology Services	Last 4 digits of account number SRCF	\$314.0
Nonpriority Creditor's Name	Last 4 digits of account number SRCF	φ314.0
P.O. Box 3380	When was the debt incurred?	
Indianapolis, IN 46206-3380	= A file by a file dealer to file	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	Пол	
_	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
☐ Check if this claim is for a community debt	_ ****	
Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify	
T-Mobile USA, Inc.	Last 4 digits of account number 1756	\$214.0
Nonpriority Creditor's Name		
P.O. Box 53410	When was the debt incurred?	
Bellevue, WA 98015-3410 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	no of the date you me, the olam is. Once an that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify	
Tenant Tracker	Last 4 digits of account number	\$2,061.0
Nonpriority Creditor's Name		
P.O. Box 3790	When was the debt incurred?	
Lubbock, TX 79452 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other, Specify	

Case 6:19-bk-01459-KSJ Doc 1 Filed 03/07/19 Page 33 of 62

Debt	or 1 Julana Denise Evans	Case number (if known)	
4.4	Verizon Wireless Bankruptcy	Last 4 digits of account number XXXX	\$1,096.00
	Nonpriority Creditor's Name Administation 500 Technology Drive #550	When was the debt incurred?	
	Saint Charles, MO 63304 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.4 5	Webbank/Fingerhut	Last 4 digits of account number	\$532.00
	Nonpriority Creditor's Name 6250 Ridgewood Road Saint Cloud, MN 56303	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.4	Wildblue Communications	Last 4 digits of account number XXXX	\$346.00
	Nonpriority Creditor's Name C/O EOS CCA 700 Longwater Drive	When was the debt incurred?	
	Norwell, MA 02061 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify	

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Case 6:19-bk-01459-KSJ Doc 1 Filed 03/07/19 Page 34 of 62

Debtor 1 Julana Denise Evans		Case number (if known)
Name and Address Account Mangement Resources P.O. Box 60607 Oklahoma City, OK 73146		u list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Auto Advantage Finance P.O. Box 96329 Oklahoma City, OK 73143		u list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Credit Collections, Inc P.O. Box 60607 Oklahoma City, OK 73146		u list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims XXXX
Name and Address Credit Systems Int Inc. 1277 Country Club Lane Fort Worth, TX 76112		u list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims XXXX
Name and Address Enhanced Recovery Company P.O. Box 57547 Jacksonville, FL 32241		u list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address ERC 8014 Bayberry Road Jacksonville, FL 32256		u list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
·	Last 4 digits of account number	3666
Name and Address Express Credit 9014 SE 29th Oklahoma City, OK 73150	On which entry in Part 1 or Part 2 did you Line <u>4.4</u> of (<i>Check one</i>):	
Express Credit 9014 SE 29th	On which entry in Part 1 or Part 2 did you Line 4.4 of (<i>Check one</i>): Last 4 digits of account number On which entry in Part 1 or Part 2 did you Line 4.4 of (<i>Check one</i>):	u list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Express Credit 9014 SE 29th Oklahoma City, OK 73150 Name and Address Express Credit Auto 4810 NW 39th Street	On which entry in Part 1 or Part 2 did you Line 4.4 of (Check one): Last 4 digits of account number On which entry in Part 1 or Part 2 did you Line 4.4 of (Check one): Last 4 digits of account number On which entry in Part 1 or Part 2 did you Line 4.31 of (Check one):	u list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims u list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Express Credit 9014 SE 29th Oklahoma City, OK 73150 Name and Address Express Credit Auto 4810 NW 39th Street Oklahoma City, OK 73122 Name and Address NCO Financial P.O. Box 15628	On which entry in Part 1 or Part 2 did you Line 4.4 of (Check one): Last 4 digits of account number On which entry in Part 1 or Part 2 did you Line 4.4 of (Check one): Last 4 digits of account number On which entry in Part 1 or Part 2 did you Line 4.31 of (Check one): Last 4 digits of account number On which entry in Part 1 or Part 2 did you Line 4.38 of (Check one):	u list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims u list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims u list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Express Credit 9014 SE 29th Oklahoma City, OK 73150 Name and Address Express Credit Auto 4810 NW 39th Street Oklahoma City, OK 73122 Name and Address NCO Financial P.O. Box 15628 Wilmington, DE 19850 Name and Address Sasntander Consumer USA 8585 N. Stemmons FWY Suite 1000	On which entry in Part 1 or Part 2 did you Line 4.4 of (Check one): Last 4 digits of account number On which entry in Part 1 or Part 2 did you Line 4.4 of (Check one): Last 4 digits of account number On which entry in Part 1 or Part 2 did you Line 4.31 of (Check one): Last 4 digits of account number On which entry in Part 1 or Part 2 did you Line 4.38 of (Check one): Last 4 digits of account number On which entry in Part 1 or Part 2 did you Line 4.39 of (Check one):	u list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims u list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims u list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims 45XX u list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims XXXX

Official Form 106 E/F

Case 6:19-bk-01459-KSJ Doc 1 Filed 03/07/19 Page 35 of 62

Debtor 1 Julana Denise Evans		Case number (if known)	
131 Tower Park Drive P.O. Box 900		Part 2: Creditors with Nonpriority Unsecured Claims	
Waterloo, IA 50704	Last 4 digits of account number	xxxx	
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?	
Verizon Wireless	Line 4.44 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims	
P.O. Box 26055 Minneapolis, MN 55426		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number	XXXX	

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				Total Claim	
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	131,541.95
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	131,541.95

Fill in this inform					
Debtor 1	Julana Denise Ev				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the: MIDDLE DISTRICT OF FLORIDA					
Case number					
(if known)					Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code

State what the contract or lease is for

2.1 Lakeena Lloyd 134-49 166 Place Building 19-C, Apt. 13A Jamaica, NY 11434 **Residential Lease**

Case 6:19-bk-01459-KSJ Doc 1 Filed 03/07/19 Page 37 of 62

	Ouse 0.12	DK 01403 KO0	Doo's Thea oc	701713 1 age 21 01 02	
Fill in this	information to identify you	r case:			
Debtor 1	Julana Denise E	vans			
	First Name	Middle Name	Last Name		
Debtor 2	ng) First Name	Middle Name	Last Name		
(Spouse if, filing	ng) First Name	ivildale Name	Last Name		
United Sta	ites Bankruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA		
Case num	ber				
(if known)				-	if this is an
				amend	ded filing
Officia	l Form 106H				
	lule H: Your Cod	lobtore			40/45
Scried	iule II. Toul Coc	ienioi 2			12/15
ill it out, a our name		e boxes on the left. Attac i). Answer every question	n the Additional Page to 	ion. If more space is needed, copy the this page. On the top of any Addition as a codebtor.	
	,	,			
■ No					
☐ Yes	3				
	hin the last 8 years, have yo na, California, Idaho, Louisiana			y? (Community property states and territongton, and Wisconsin.)	ories include
	Go to line 3. s. Did your spouse, former spo	ouse, or legal equivalent liv	e with you at the time?		
in line Form	e 2 again as a codebtor only	if that person is a guarar	ntor or cosigner. Make s	if your spouse is filing with you. List the sure you have listed the creditor on Sc 6G). Use Schedule D, Schedule E/F, or	hedule D (Official
	Column 1: Your codebtor Name, Number, Street, City, State and 2	ZIP Code		Column 2: The creditor to whom you Check all schedules that apply:	ou owe the debt
3.1				☐ Schedule D, line	
	Name			Schedule E/F, line	
				☐ Schedule G, line	
-	Number Street			_	
	City	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
-	Number Street			_	
	City	State	ZIP Code		

Fill	in this information to identify your c	ase:								
De	btor 1 Julana Deni	se Evans								
	btor 2 buse, if filing)									
Un	ited States Bankruptcy Court for the	e: MIDDLE DISTRICT C	F FLORIDA		_					
	se number nown)		-			☐ An		nt showing	g postpetition	
0	fficial Form 106I						M / DD/ Y		mowing date.	
	chedule I: Your Inc	ome				IVII	VI / DD/ T	111		12/15
sup spo atta	as complete and accurate as pos- plying correct information. If you use. If you are separated and you ch a separate sheet to this form. The describe Employment	are married and not fili or spouse is not filing w	ng jointly, and your ith you, do not inclu	spouse ide infor	is liv mati	ring with y on about	ou, inclυ your spo	ide inforn use. If mo	nation about ore space is	your needed,
1.	Fill in your employment information.		Debtor 1				Debtor 2	or non-fi	ling spouse	
	If you have more than one job,	Francisco estatua	■ Employed				☐ Emplo	yed		
	attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed				mployed		
	employers.	Occupation	Driver							
	Include part-time, seasonal, or self-employed work.	Employer's name	Dari Trucking, I	nc.						
	Occupation may include student or homemaker, if it applies.	Employer's address	11726 Bentry St Orlando, FL 328							
		How long employed t	here? 4 mont	hs						
Pa	rt 2: Give Details About Mor	nthly Income								
	imate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to r	eport for	any	line, write	\$0 in the	space. Inc	clude your no	n-filing
	ou or your non-filing spouse have mee space, attach a separate sheet to		ombine the informatio	n for all	empl	oyers for th	hat perso	n on the lir	nes below. If	you need
						For Debt	tor 1		otor 2 or ng spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$		0.00	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$		0.00	\$	N/A	

Debto	or 1	Julana Denise Evans	-	(Case r	number (<i>if k</i>	nown)				
					For	Debtor 1			r Debtor		
	Cor	by line 4 here	4.		\$		0.00	\$	n-filing s	N/A	
	·				_			_			_
		t all payroll deductions:	_								
	5a.	Tax, Medicare, and Social Security deductions	58		\$		0.00	\$_		N/A	_
	5b.	Mandatory contributions for retirement plans	5b		\$ \$		0.00	\$_		N/A	_
	5c. 5d.	Voluntary contributions for retirement plans Required repayments of retirement fund loans	50 50		\$ 		0.00 0.00	\$_ \$		N/A N/A	_
	5u. 5e.	Insurance	5e		\$ —		0.00	\$_		N/A	_
	5f.	Domestic support obligations	5f		\$		0.00	\$_		N/A	_
	5g.	Union dues	5 <u>c</u>		\$		0.00	\$		N/A	_
	5h.	Other deductions. Specify:).+	\$		0.00	+ \$		N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.		\$		0.00	\$		N/A	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$		0.00	\$		N/A	_
8.		t all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total			·			· <u> </u>			-
		monthly net income.	88	ā.	\$	3,44	0.00	\$		N/A	
	8b.	Interest and dividends	8b		\$		0.00	\$		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80) .	\$		0.00	\$		N/A	_
	8d.	Unemployment compensation	80	d.	\$		0.00	\$		N/A	-
	8e.	Social Security	86	€.	\$	(0.00	\$		N/A	_
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	_ 8f _ 8g	j.	\$ \$		0.00 0.00	\$_ \$_		N/A N/A	_
	8h.	Other monthly income. Specify:	_ 8h	۱.+	\$		0.00	+ \$_		N/A	_
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	;	\$	3,44	0.00	\$_		N/A	4
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	9	3,440.00	+ \$		N/A	= \$	3,440.00
		If the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.				,				[_	3,110100
	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify:	depe					•	Schedule	e J. +\$	0.00
		d the amount in the last column of line 10 to the amount in line 11. The reste that amount on the Summary of Schedules and Statistical Summary of Certaillies							e. 12.	\$	3,440.00
13.	Do	you expect an increase or decrease within the year after you file this form No.	?							Combi month	ned ly income
	_	Yes Explain:									

Official Form 106I Schedule I: Your Income page 2

Fill	in this informat	ion to identify yo	ur case:								
Deb	tor 1	Julana Denis	e Evans				Ch	eck if	this is:		
								An	amended filing		
Deb	tor 2									ving postpetition cha	apter
(Spc	ouse, if filing)					_		13 (expenses as of t	the following date:	
Unite	ed States Bankru	uptcy Court for the:	MIDDLI	E DISTRICT OF FLO	ORIDA			MM	I / DD / YYYY		
Case	e number										
(If kr	nown)										
Of	fficial Fo	rm 106J									
			Evnor	1606							40/45
		J: Your E		ISES If two married ped	anla ara	filing together be	-4h ava aa	alls	rooneneible fe		12/15
info	ormation. If mo		eded, atta	ch another sheet t							
Pari	t 1: Descri	be Your House	hold								
1.	Is this a join		iioiu								
	■ No. Go to										
			n a conar	ate household?							
			n a separ	ate nousenoid?							
		-							_		
	Ll Ye	es. Debtor 2 mus	t file Offici	al Form 106J-2, <i>Exp</i>	penses to	or Separate House	ehold of De	ebtor 2	2.		
2.	Do you have	dependents?	□ No								
	Do not list De Debtor 2.	ebtor 1 and	Yes.	Fill out this information		Dependent's relati Debtor 1 or Debtor			Dependent's age	Does dependent live with you?	:
	5									□ No	I
	Do not state to dependents r					Daughter			18	■ Yes	
	acpendenter	idiilos.								□ No	
										☐ Yes	
										□ No	
										☐ Yes	
										□ No	
										☐ Yes	
3.	expenses of	enses include people other th your depender	nan $_{f \Box}$	No Yes						– 103	
				_							
		ate Your Ongoir		y Expenses uptcy filing date ur	aloce ve	u ara uaina thia fe	2rm 20 0 1	nunnl	oment in a Cha	ntor 12 ages to re	nort
exp	enses as of a plicable date.	date after the b	ankruptc	y is filed. If this is	a supple	mental <i>Schedule</i>	J, check	the b	ox at the top of	f the form and fill i	in the
Incl	luda avnansas	s naid for with r	on-cash	government assist	ance if v	ou know					
				luded it on Sched							
(Off	ficial Form 100	6I.)							Your expe	enses	
4.		r home ownersl d any rent for the		ses for your resident lot.	ence. Inc	lude first mortgage	4.	\$		1,200.00	
	If not include	ed in line 4:									
	4a. Real e	state taxes					4a.	\$		0.00	
		ty, homeowner's	s, or renter	's insurance			4b.	· · ·		0.00	
	•	•		ıpkeep expenses			4c.	· -		0.00	
		owner's associati					4d.	· : —		0.00	
5.	Additional m	nortgage payme	ents for yo	our residence, such	as hom	e equity loans	5.	\$		0.00	

otor 1	Julana Denise Evans	Case num	ber (if known)	
Utilit	ies:			
Utilit 6a.	Electricity, heat, natural gas	6a.	\$	200.00
6b.	Water, sewer, garbage collection	6b.		65.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.		270.00
6d.	Other. Specify:	6d.	·	0.00
	I and housekeeping supplies	— 7.	·	400.00
	dcare and children's education costs	8.	·	0.00
	ning, laundry, and dry cleaning	9.	\$	0.00
	onal care products and services	10.		200.00
	cal and dental expenses	11.		300.00
	sportation. Include gas, maintenance, bus or train fare.	11.	Ψ	300.00
	ot include car payments.	12.	\$	300.00
	rtainment, clubs, recreation, newspapers, magazines, and books	13.	\$	50.00
	itable contributions and religious donations	14.	•	0.00
. Insu	•		<u> </u>	0.00
	ot include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	0.00
	Health insurance	15b.		0.00
	Vehicle insurance	15c.	·	150.00
	Other insurance. Specify:	15d.	·	0.00
	s. Do not include taxes deducted from your pay or included in lines 4 or 20.		T	0.00
	ify: Self Employment	16.	\$	400.00
	Illment or lease payments:			
17a.	Car payments for Vehicle 1	17a.	\$	0.00
17b.	Car payments for Vehicle 2	17b.	\$	0.00
17c.	Other. Specify:	17c.	\$	0.00
	Other. Specify:	17d.	\$	0.00
. Your	payments of alimony, maintenance, and support that you did not report as			2.22
	icted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	· ·	0.00
	r payments you make to support others who do not live with you.		\$	0.00
Spec	·	19.		
	r real property expenses not included in lines 4 or 5 of this form or on Sche			
	Mortgages on other property	20a.		0.00
	Real estate taxes	20b.	·	0.00
20c.	Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d.	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e.	Homeowner's association or condominium dues	20e.	\$	0.00
. Othe	r: Specify: professional	21.	+\$	100.00
) Calc	ulate your monthly expenses			
	Add lines 4 through 21.		\$	3,635.00
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		ψ ————————————————————————————————————	3,033.00
			φ	
22c.	Add line 22a and 22b. The result is your monthly expenses.		\$	3,635.00
	ulate your monthly net income.		L	
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	3,440.00
	Copy your monthly expenses from line 22c above.	23b.	-\$	3,635.00
23c.	Subtract your monthly expenses from your monthly income.	00.5	œ.	-195.00
	The result is your monthly net income.	23c.	\$	-195.00
For e	ou expect an increase or decrease in your expenses within the year after you cample, do you expect to finish paying for your car loan within the year or do you expect you ication to the terms of your mortgage?			or decrease because of
■ N	0.			
ΠY				
	I			

Fill in this informa	ation to identify your	case:			
Debtor 1	Julana Denise Ev	ans			1
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bank	kruptcy Court for the:	MIDDLE DISTRICT OF	F FLORIDA		
Case number					☐ Check if this is an amended filing
Official Form Declarati		n Individua	l Debtor's	Schedules	12/15
If two married peo	ple are filing together	, both are equally resp	onsible for supplying	g correct information.	
obtaining money o years, or both. 18 l		connection with a bar			atement, concealing property, or 000, or imprisonment for up to 20
Did you pay	or agree to pay some	one who is NOT an atto	orney to help you fill	out bankruptcy forms?	
■ No					
☐ Yes. Na	me of person				ankruptcy Petition Preparer's Notice, on, and Signature (Official Form 119)
	of perjury, I declare true and correct.	that I have read the sui	mmary and schedule	es filed with this declara	tion and
X /s/ Julan	a Denise Evans		X		
Julana D	Denise Evans of Debtor 1		Signatu	ure of Debtor 2	
Date Ma	arch 4, 2019		Date		

Official Form 106Dec

	in this inform					
		nation to identify you				
Dei	otor 1	Julana Denise E First Name	Vans Middle Name	Last Name		
1	otor 2 ouse if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Bar	nkruptcy Court for the:	MIDDLE DISTRICT OF F	LORIDA		
1	se number				_	Check if this is an Imended filing
Sta Be a	as complete a	of Financial		are filing together, both are	equally responsible for sup	
		n). Answer every ques		this form. On the top of any	y additional pages, write yo	ur name and case
Par	t 1: Give D	etails About Your Ma	rital Status and Where You	Lived Before		
1.	What is your	current marital statu	ıs?			
	□ Married■ Not mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>i</i> .	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. state					ity property state or territor ico, Texas, Washington and V	
	■ No □ Yes. Ma	ike sure you fill out <i>Sch</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Par	t 2 Explai	n the Sources of You	r Income			
4.	Fill in the total	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
	□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$6,400.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

Debtor 1 Julana Denise Evans						Case number (if known)							
					Debtor 1				Debtor 2				
					Sources	of income that apply.	(bef	oss income fore deductions and lusions)	Sources of inc		Gross income (before deductions and exclusions)		
			dar year: December :	31, 2018)	■ Wages bonuses,	s, commissions, tips	missions, \$42,205.00			☐ Wages, commissions, bonuses, tips			
					☐ Opera	ting a business			☐ Operating a	business			
			lar year bei December :		■ Wages bonuses,	s, commissions, tips		\$40,947.00	☐ Wages, cor bonuses, tips	nmissions,			
					☐ Opera	ting a business			☐ Operating a	business			
W	innin st ea	gs. i ich s Io	f you are fili	ng a joint cas	e and you l	have income that y	ou rec	vidends; money collect eived together, list it controlled income to	only once under D	ebtor 1.	d gambling and lottery		
					Debtor 1				Dobtor 2				
						of income below.	eac (bef	h source fore deductions and lusions)	Debtor 2 Sources of ind Describe below		Gross income (before deductions and exclusions)		
Part 3	}:	List	Certain Pa	yments You	Made Befo	ore You Filed for I	Bankrı	uptcy					
6. A] N	lo.	Neither Deindividual puring the No. Yes	ebtor 1 nor Derimarily for a 90 days befor Go to line 7 List below 6 paid that crunot include to adjustment or Debtor 2 or 90 days befor Go to line 7 List below 6	pebtor 2 ha personal, f personal, f personal, f personal, f personal, f peach creditor payments t t on 4/01/19 pr both have pre you filed peach creditor ments for d	amily, or household for bankruptcy, did not to whom you paid not include paymen or an attorney for the and every 3 years are primarily consult for bankruptcy, did not to whom you paid nomestic support of	mer d d purp d you p d a tota ts for c nis ban s after mer d d you p	ebts. Consumer debtose." Day any creditor a total of \$6,425* or more in the domestic support obliging kruptcy case. that for cases filed on	I of \$6,425* or mone or more parations, such as consider the date. I of \$600 or more	ore? yments and the hild support and the supp	ne total amount you nd alimony. Also, do creditor. Do not		
c	:redi	itor's	s Name and	l Address		Dates of payme	nt	Total amount	Amount you	Was this n	ayment for		
						_ also of paymor	-	paid	still owe	uno p			

Case number (if known)

7.	Within 1 year before you filed for bankrup <i>Insiders</i> include your relatives; any general p of which you are an officer, director, person in a business you operate as a sole proprietor, alimony.	artners; relatives of any ger n control, or owner of 20% of	neral partners; partne or more of their voting	erships of which yo g securities; and ar	u are a gener ny managing a	al partner; corporation agent, including one fo
	■ No□ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or co		yments or transfer a	iny property on a	ecount of a d	lebt that benefited an
	■ No□ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe		this payment ditor's name
Pai	rt 4: Identify Legal Actions, Repossessio	ons, and Foreclosures				
9.	Within 1 year before you filed for bankrup: List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the	ne case
10.	Within 1 year before you filed for bankrup Check all that apply and fill in the details below		erty repossessed, f	oreclosed, garnis	hed, attache	d, seized, or levied?
	No. Go to line 11.Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property		Date		Value of the property
		Explain what happene	d			p
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment bed No ✓ Yes. Fill in the details.		cluding a bank or fir	nancial institution	, set off any	amounts from your
	Creditor Name and Address	Describe the action the	e creditor took	Date :	action was	Amount
12.	Within 1 year before you filed for bankrup court-appointed receiver, a custodian, or a		erty in the possessi	ion of an assigne	e for the ben	efit of creditors, a
	■ No □ Yes					
Pai	rt 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift.	ptcy, did you give any gift	s with a total value	of more than \$60	0 per person	?
	Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person	Describe the gifts		Dates the gi	you gave fts	Value
	Person to Whom You Gave the Gift and Address:					

Debtor 1 Julana Denise Evans

Case number (if known)

14.	Within 2 years before you filed for bankrupto ■ No □ Yes. Fill in the details for each gift or contri		ns with a total value of more tha	nn \$600 to any charity?
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Dates you contributed	Value
Par	t 6: List Certain Losses			
15.	Within 1 year before you filed for bankruptcy or gambling?	or since you filed for bankruptcy, did y	ou lose anything because of th	neft, fire, other disaster
	■ No			
	Yes. Fill in the details.			
		scribe any insurance coverage for the lo	oss Date of your	Value of property
	how the loss occurred Incl	lude the amount that insurance has paid. Lurance claims on line 33 of Schedule A/B:	ist pending loss	lost
Day	t 7: List Certain Payments or Transfers		, ,	
	consulted about seeking bankruptcy or prep Include any attorneys, bankruptcy petition preparation. No Yes. Fill in the details. Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You Randy Hillman, P.A. 1073 Willa Springs Drive #2029 Winter Springs, FL 32708 hillmanlaw@earthlink.net			Amount of payment \$1,200.00
17.	Within 1 year before you filed for bankruptcy promised to help you deal with your creditor Do not include any payment or transfer that you	rs or to make payments to your creditor		perty to anyone who
	No No			
	☐ Yes. Fill in the details.			
	Person Who Was Paid Address	Description and value of any propertransferred	erty Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankrupto transferred in the ordinary course of your but include both outright transfers and transfers maintained gifts and transfers that you have already	usiness or financial affairs? Ide as security (such as the granting of a se		
	■ No □ Yes. Fill in the details.			
		Description and value of	Describe any present as	Data transfer
	Person Who Received Transfer Address	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
	Person's relationship to you			

Debtor 1 Julana Denise Evans

Debtor 1	Julana	Denise	Evans
Debioi i	Julalia	Dellise	Evalis

Case number (if known)

19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details.										
	Name of trust	Description and v	alue of the pro	perty trans	sferred	Date Transfer was made					
Par	t 8: List of Certain Financial Accounts, Instr	uments, Safe Deposit	Boxes, and S	torage Uni	ts	made					
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or chouses, pension funds, cooperatives, associa No Yes. Fill in the details.	other financial accour	nts; certificate:	s of deposi							
	Name of Financial Institution and L	ast 4 digits of account number	Type of account or instrument		Date account was closed, sold, moved, or transferred	Last balance before closing or transfer					
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?										
	■ No □ Yes. Fill in the details.										
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?					
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?										
	■ No □ Yes. Fill in the details.										
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)		Describe	the contents	Do you still have it?					
Par	t 9: Identify Property You Hold or Control fo	or Someone Else									
23.	Do you hold or control any property that some for someone.	eone else owns? Inclu	ude any prope	rty you bor	rowed from, are storing fo	or, or hold in trust					
	■ No □ Yes. Fill in the details.										
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value					
Par	t 10: Give Details About Environmental Inform	mation									
For	the purpose of Part 10, the following definition	s apply:									
	Environmental law means any federal, state, or toxic substances, wastes, or material into the regulations controlling the cleanup of these s	air, land, soil, surface	e water, groun								
	Site means any location, facility, or property a to own, operate, or utilize it, including disposa	s defined under any e		law, wheth	er you now own, operate	, or utilize it or used					
	Hazardous material means anything an enviro hazardous material, pollutant, contaminant, or		as a hazardous	s waste, ha	zardous substance, toxic	substance,					

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Debtor 1 Julana Denise Evans

Case number (if known)

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental l									
		No Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Hav	e you notified any governmental unit of	any release of hazardous material?						
		No Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Hav	e you been a party in any judicial or adm	ninistrative proceeding under any envi	ronmental law? Include settlements	and orders.				
		No Yes. Fill in the details.							
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Pai	t 11:	Give Details About Your Business or 0	Connections to Any Business						
27.	With	nin 4 years before you filed for bankrupte	cy, did you own a business or have an	y of the following connections to any	/ business?				
		☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time							
		A member of a limited liability comp	any (LLC) or limited liability partnershi	p (LLP)					
		A partner in a partnership							
		☐ An officer, director, or managing exe	·						
		An owner of at least 5% of the voting	g or equity securities of a corporation						
		No. None of the above applies. Go to Part 12.							
		Yes. Check all that apply above and fill	in the details below for each business	-					
		siness Name dress	Describe the nature of the business	Employer Identification numbe Do not include Social Security					
		nber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed					
28.		nin 2 years before you filed for bankruptoitutions, creditors, or other parties.	cy, did you give a financial statement t	o anyone about your business? Incl	ude all financial				
		No							
		Yes. Fill in the details below.							
	Name Address (Number, Street, City, State and ZIP Code)								

Case 6:19-bk-01459-KSJ Doc 1 Filed 03/07/19 Page 49 of 62

Julana Denise Evans		Case number (if known)
Part 12: Sign Below		
	aking a false statement, concealing	chments, and I declare under penalty of perjury that the answers g property, or obtaining money or property by fraud in connection for up to 20 years, or both.
/s/ Julana Denise Evans		
Julana Denise Evans Signature of Debtor 1	Signature of Deb	tor 2
Date March 4, 2019	Date	
Did you attach additional pages to <i>Your</i> ■ No □ Yes	Statement of Financial Affairs for I	ndividuals Filing for Bankruptcy (Official Form 107)?
Did you pay or agree to pay someone wh ■ No	no is not an attorney to help you fil	out bankruptcy forms?
☐ Yes. Name of Person . Attach the	Bankruptcy Petition Preparer's Notice	ce, Declaration, and Signature (Official Form 119).

Fill in this info	rmation to identify yo	ur case:		
Debtor 1	Julana Denise			
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	Sankruptcy Court for the	e: MIDDLE DISTRIC	CT OF FLORIDA	
Case number				
(if known)				☐ Check if this is an amended filing
Official Fo	orm 108			
		on for Indiv	iduals Filing Under Chapto	er 7 12/15
If you are an inc	dividual filing under c	hapter 7, you must fi	Il out this form if:	
	ve claims secured by			
	ased personal propert			at for the mosting of availities
	never is earlier, unless		you file your bankruptcy petition or by the date so time for cause. You must also send copies to the	
	people are filing toget and date the form.	her in a joint case, bo	oth are equally responsible for supplying correct in	nformation. Both debtors must
	e and accurate as pos your name and case r		s needed, attach a separate sheet to this form. On	the top of any additional pages,
		, ,		
	Your Creditors Who H		N. Craditara Wha Llava Claima Saarrad by Branant	(Official Form 40CD) fill in the
information b		Part 1 of Schedule L	D: Creditors Who Have Claims Secured by Property	y (Official Form 106D), fill in the
Identify the c	creditor and the propert	y that is collateral	What do you intend to do with the property that secures a debt?	t Did you claim the property as exempt on Schedule C
Creditor's			☐ Surrender the property.	□ No
name:			Retain the property and redeem it.	
Description o	of .		Retain the property and enter into a	☐ Yes
property	"		Reaffirmation Agreement. Retain the property and [explain]:	
securing deb	t:		- Retain the property and [explain].	_
Creditor's			☐ Surrender the property.	□ No
name:			Retain the property and redeem it.	
Description o	.f		☐ Retain the property and enter into a	☐ Yes
Description o property	Л		Reaffirmation Agreement. Retain the property and [explain]:	
securing deb	t:		- retain the property and [explain].	_
Creditor's			☐ Surrender the property.	□ No
name:			Retain the property and redeem it.	
Description o	of		Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property			Retain the property and [explain]:	

Official Form 108

Creditor's

securing debt:

Statement of Intention for Individuals Filing Under Chapter 7

☐ Surrender the property.

☐ No

Case 6:19-bk-01459-KSJ Doc 1 Filed 03/07/19 Page 51 of 62

Debtor 1 Julana Denise Evans	Case number (if	known)
name: Description of property securing debt:	 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	☐ Yes
in the information below. Do not list real estate le	Leases bu listed in Schedule G: Executory Contracts and Une ases. Unexpired leases are leases that are still in effec lease if the trustee does not assume it. 11 U.S.C. § 36	ct; the lease period has not yet ended.
Describe your unexpired personal property lease	es	Will the lease be assumed?
Lessor's name: Description of leased Property:		□ No
Lessor's name: Description of leased Property:		□ No
Lessor's name: Description of leased Property:		□ No
Lessor's name: Description of leased Property:		□ No
Lessor's name: Description of leased Property:		□ No
Lessor's name: Description of leased Property:		□ No
Lessor's name: Description of leased		□ No
Property: Part 3: Sign Below		☐ Yes
	cated my intention about any property of my estate th	at secures a debt and any personal
X /s/ Julana Denise Evans	X	
Julana Denise Evans Signature of Debtor 1	Signature of Debtor 2	
Date March 4, 2019	Date	

Official Form 108

Fill in this inf	formation to identify your case:		Ch			in a stand in their farmer are	lin Farm
Debtor 1	Julana Denise Evans			ieck one i 2A-1Sup _l		irected in this form and	i in Form
Debtor 2	Julana Denise Evans			■ 1 The	ro io no proc	umption of abuse	
(Spouse, if filing)					•	·	
United State	s Bankruptcy Court for the: Middle District of	Florida	'			o determine if a presul nade under <i>Chapter</i> 7	•
Case numbe	er					icial Form 122A-2).	
(if known)						does not apply now be service but it could ap	
				☐ Chec	k if this is a	n amended filing	
Official	Form 122A - 1						
Chapte	r 7 Statement of Your Cui	rent Moi	nthly Inc	ome			12/15
attach a separ case number (qualifying mili	te and accurate as possible. If two married people ate sheet to this form. Include the line number to viff known). If you believe that you are exempted fro tary service, complete and file Statement of Exemple Calculate Your Current Monthly Income	vhich the additior m a presumption	nal information a of abuse becau	applies. O ise you do	n the top of a	ny additional pages, wri narily consumer debts o	te your name and or because of
1. What is	s your marital and filing status? Check one or	ıly.					
■ Not	married. Fill out Column A, lines 2-11.						
☐ Mar	ried and your spouse is filing with you. Fill o	ut both Columns	A and B, lines	2-11.			
☐ Mar	ried and your spouse is NOT filing with you.	You and your s	spouse are:				
	iving in the same household and are not lega	ally separated.	Fill out both Co	lumns A	and B, lines 2	2-11.	
p	iving separately or are legally separated. Fill enalty of perjury that you and your spouse are le ving apart for reasons that do not include evadi	egally separated	d under nonban	kruptcy l	aw that applic	es or that you and you	
101(10A). F the 6 month	average monthly income that you received from all For example, if you are filing on September 15, the 6-mns, add the income for all 6 months and divide the tota you the same rental property, put the income from that p	nonth period would by 6. Fill in the re	be March 1 throusult. Do not include	ugh Augus de any inco	t 31. If the amo	ount of your monthly incor ore than once. For examp	ne varied during ble, if both
				Column Debtor		Column B Debtor 2 or non-filing spouse	
	ross wages, salary, tips, bonuses, overtime, deductions).	and commission	ons (before all	\$	2,786.83	\$	
	y and maintenance payments. Do not include a B is filled in.	payments from	a spouse if	\$	0.00	\$	
of you from an and roo	ounts from any source which are regularly poor your dependents, including child support a unmarried partner, members of your household mmates. Include regular contributions from a sp. Do not include payments you listed on line 3.	. Include regular d, your depende	contributions nts, parents,	\$	0.00	\$	
	ome from operating a business, profession,	or farm					
			otor 1				
	eceipts (before all deductions)	\$ 0.00					
	ry and necessary operating expenses	-\$0.00	Copy here ->	c	0.00	\$	
	nthly income from a business, profession, or far come from rental and other real property	m \$	Copy nere ->	Ψ	0.00	Ψ	
6. Net inc	ome nom remai and other real property	Deb	otor 1				
Gross r	receipts (before all deductions)	\$ 0.00					
	y and necessary operating expenses	-\$ 0.00					
	nthly income from rental or other real property	\$ 0.00	Copy here ->	\$	0.00	\$	
7. Interes	t, dividends, and royalties	_		\$	0.00	\$	

Official Form 122A-1

employment compensation not enter the amount if you contend that the amount received was a benefit under Social Security Act. Instead, list it here: For you \$ 0.00 For your spouse \$ Insion or retirement income. Do not include any amount received that was a lefit under the Social Security Act. Some from all other sources not listed above. Specify the source and amount. Into the include any benefits received under the Social Security Act or payments leived as a victim of a war crime, a crime against humanity, or international or	Column A lebtor 1 0.00	Column B Debtor 2 or non-filling spo	ouse
not enter the amount if you contend that the amount received was a benefit under Social Security Act. Instead, list it here: For you \$ 0.00 For your spouse \$ Insion or retirement income. Do not include any amount received that was a lefit under the Social Security Act. Forme from all other sources not listed above. Specify the source and amount. Include any benefits received under the Social Security Act or payments leived as a victim of a war crime, a crime against humanity, or international or	0.00		
not enter the amount if you contend that the amount received was a benefit under Social Security Act. Instead, list it here: For you \$ 0.00 For your spouse \$ Insion or retirement income. Do not include any amount received that was a lefit under the Social Security Act. Forme from all other sources not listed above. Specify the source and amount. Include any benefits received under the Social Security Act or payments leived as a victim of a war crime, a crime against humanity, or international or			
sion or retirement income. Do not include any amount received that was a lefit under the Social Security Act. some from all other sources not listed above. Specify the source and amount. Include any benefits received under the Social Security Act or payments leived as a victim of a war crime, a crime against humanity, or international or			
sion or retirement income. Do not include any amount received that was a lefit under the Social Security Act. Some from all other sources not listed above. Specify the source and amount. Include any benefits received under the Social Security Act or payments leived as a victim of a war crime, a crime against humanity, or international or			
sion or retirement income. Do not include any amount received that was a lefit under the Social Security Act. Some from all other sources not listed above. Specify the source and amount. Include any benefits received under the Social Security Act or payments leived as a victim of a war crime, a crime against humanity, or international or			
not include any benefits received under the Social Security Act or payments eived as a victim of a war crime, a crime against humanity, or international or	0.00	\$	
nestic terrorism. If necessary, list other sources on a separate page and put the I below.			
		\$	
\$	0.00	\$	
Total amounts from separate pages, if any.	0.00	\$	
culate your total current monthly income. Add lines 2 through 10 for h column. Then add the total for Column A to the total for Column B. \$ 2,7	786.83 + \$	=	\$\$
			Total current mont
Determine Whether the Means Test Applies to You			income
Multiply by 12 (the number of months in a year) The result is your annual income for this part of the form		12b. [x 12 \$33,441.9
culate the median family income that applies to you. Follow these steps:			
in the state in which you live.			
in the number of people in your household.		_	
in the median family income for your state and size of household.		13.	\$ 58,960.0
find a list of applicable median income amounts, go online using the link specified in the link specified in the form. This list may also be available at the bankruptcy clerk's office.	the separate instruc	ctions	
w do the lines compare?			
Line 12b is less than or equal to line 13. On the top of page 1, check box 1, Go to Part 3.	,	•	
Line 12b is more than line 13. On the top of page 1, check box 2, <i>The presul</i> Go to Part 3 and fill out Form 122A-2.	ımption of abuse is	determined by F	Form 122A-2.
Sign Below			
By signing here, I declare under penalty of perjury that the information on this stater	ment and in any att	achments is true	and correct.
X /s/ Julana Denise Evans Julana Denise Evans			
Signature of Debtor 1			
March 4, 2019			
March 4, 2019 MM / DD / YYYY If you checked line 14a, do NOT fill out or file Form 122A-2.			

Debtor 1 Julana Denise Evans Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 09/01/2018 to 02/28/2019.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **Employment**

Income by Month:

6 Months Ago:	09/2018	\$4,558.00
5 Months Ago:	10/2018	\$4,558.00
4 Months Ago:	11/2018	\$0.00
3 Months Ago:	12/2018	\$2,500.00
2 Months Ago:	01/2019	\$2,325.00
Last Month:	02/2019	\$2,780.00
	Average per month:	\$2,786.83

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
<u>+</u> \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	<u>\$75</u>	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Middle District of Florida

		Middle District of Florida		
In re	Julana Denise Evans		Case No.	
		Debtor(s)	Chapter	7
	V.E.D.			
	VERI	FICATION OF CREDITOR	MATRIX	
he ab	ove-named Debtor hereby verifies t	that the attached list of creditors is true and co	orrect to the best	of his/her knowledge.
Date:	March 4, 2019	/s/ Julana Denise Evans		
Date.		Julana Denise Evans		

Signature of Debtor

Julana Denise Evans 900 Alsace Drive Kissimmee, FL 34759

Capio Partners 2222Texoma PY 150 Sherman, TX 75091 Credit Systems Int Inc. 1277 Country Club Lane Fort Worth, TX 76112

Randy Hillman Randy Hillman, P.A. 1073 Willa Springs Drive #2029 Winter Springs, FL 32708 Capio Partners 2222 Texoma PY 150 Sherman, TX 75091 Direct TV c/o Recievables Performance 20816 44th Avenue W. Lynnwood, WA 98036

Acceptance Now Rooms to Go 5501 Headquarters Drive Plano, TX 75024 Capital One P.O. Box 60599 City of Industry, CA 91716 Eagle Peak Emerg Phys, LLC P.O. Box 80150 Philadelphia, PA 19101-1150

Account Mangement Resources P.O. Box 60607 Oklahoma City, OK 73146 Capital One Bank P.O. Box 30281 Salt Lake City, UT 84130 Eagle Peak Emergency Phy LLC P.O. Box 80150 Philadelphia, PA 19101-1150

Advance America First Financial Assets Mge 876 S. US 17-192 Longwood, FL 32750 Conn Appliances, Inc. P.O. Box 2358 Beaumont, TX 77704 Enhanced Recovery Company P.O. Box 57547 Jacksonville, FL 32241

Ashton Way Apartment 2613 N. Midland Drive Midland, TX 79707 Courtesy Loans 1600 E. Main Street Cushing, OK 74023 ERC 8014 Bayberry Road Jacksonville, FL 32256

Auto Advantage Finance 4810 NW 39 Oklahoma City, OK 73122 Credit Collection Services 725 Canton Street Norwood, MA 02062 Exeter Finance LLC P.O. Box 166097 Irving, TX 75016

Auto Advantage Finance P.O. Box 96329 Oklahoma City, OK 73143 Credit Collections, Inc P.O. Box 60607 Oklahoma City, OK 73146 Express Credit 9014 SE 29th Oklahoma City, OK 73150

Brighton Court Apartments 3221 Neely Avenue Midland, TX 79707 Credit Collections, Inc. P.O. Box 60607 Oklahoma City, OK 73146 Express Credit Auto 4810 NW 39th Street Oklahoma City, OK 73122 First Premier Bank 3820 N. Louise Avenue Sioux Falls, SD 57107 Neighborhood Credit Union 13651 Montfort Drive Dallas, TX 75240 Sheridan Radiology Services P.O. Box 3380 Indianapolis, IN 46206-3380

Hunter Warfield Inc. 4620 Woodland Corporate Bv Tampa, FL 33614 Oklahoma Natural Gas P.O. Box 219296 Kansas City, MO 64121 Synerprise Consulting 5651 Broadmoor St. Mission, KS 66202

Imagine P.O. Box 105555 Atlanta, GA 30348 Poinciana Medical Center P.O. Box 406687 Atlanta, GA 30384 T-Mobile USA, Inc. P.O. Box 53410 Bellevue, WA 98015-3410

Jefferson Capital System 16 McLeland Road Saint Cloud, MN 56303 Poinciana Medical Center P.O. Box 740771 Cincinnati, OH 45274-0771 Tenant Tracker P.O. Box 3790 Lubbock, TX 79452

Lake Jackson Modern Dentistr 90 Oak Drive Suite C Lake Jackson, TX 77566 Rooms To Go

The CBE Group Inc 131 Tower Park Drive P.O. Box 900 Waterloo, IA 50704

Mattress Firm 4650 Pleasant Hill Road Kissimmee, FL 34758 Santa Fe Apartments 5010 Loop 250 Frontage Road Midland, TX 79707 Verizon Wireless P.O. Box 26055 Minneapolis, MN 55426

Meridian Technology 1312 South Sangre Road Stillwater, OK 74074 Santander Consumer USA P.O. Box 660633 Dallas, TX 75266-0633 Verizon Wireless Bankruptcy Administation 500 Technology Drive #550 Saint Charles, MO 63304

Midland Emergency Management 2435 Hwy 80 Midland, TX 79706 Sasntander Consumer USA 8585 N. Stemmons FWY Suite 1000 Dallas, TX 75247 Webbank/Fingerhut 6250 Ridgewood Road Saint Cloud, MN 56303

NCO Financial P.O. Box 15628 Wilmington, DE 19850 Security Finance COrp P.O. Box 3146 Spartanburg, SC 29304 Wildblue Communications C/O EOS CCA 700 Longwater Drive Norwell, MA 02061 B2030 (Form 2030) (12/15)

United States Bankruptcy Court Middle District of Florida

In re	Julana Denise Evans		Case N	lo.	
		Debtor(s)	Chapte	r 7	
	DISCLOSURE OF COMPENS	SATION OF ATTO	RNEY FOR	DEBTOR(S)	
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	of the petition in bankruptc	y, or agreed to be p	aid to me, for servi	
				1,200.00	
	Prior to the filing of this statement I have received		\$	1,200.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed compen	sation with any other perso	n unless they are m	embers and associa	ntes of my law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name				my law firm. A
5.	In return for the above-disclosed fee, I have agreed to rend	ler legal service for all aspe	cts of the bankrupto	cy case, including:	
	a. Analysis of the debtor's financial situation, and rendering the Preparation and filing of any petition, schedules, statem Representation of the debtor at the meeting of creditors defected. [Other provisions as needed] Negotiations with secured creditors to recreaffirmation agreements and applications 522(f)(2)(A) for avoidance of liens on house	nent of affairs and plan which and confirmation hearing, duce to market value; eas as needed; preparation	ch may be required and any adjourned kemption planni	; hearings thereof; ng; preparation ;	and filing of
5.	By agreement with the debtor(s), the above-disclosed fee dependent with the debtors in any disclosed any other adversary proceeding.			nces, relief from	stay actions or
		CERTIFICATION			
	I certify that the foregoing is a complete statement of any anahruptcy proceeding.	ngreement or arrangement for	or payment to me for	or representation of	the debtor(s) in
N	larch 4, 2019	/s/ Randy Hillma	an		
D	ate	Randy Hillman : Signature of Attori			
		Randy Hillman,	P.A.		
		1073 Willa Sprir Winter Springs,	ngs Drive #2029 FI 32708		
		407 695-0874 F	ax: 407 803-610	4	
		HillmanLaw@ou	utlook.com		
		Name of law firm			